U.S. Department of Commerce Patent and Trademark Office PATENT

# UTILITY PATENT APPLICATION TRANSMITTAL

| Commissioner  | PATENT APPLICATION<br>for Patents<br>A 22313-1450 | Customer No. 23696<br>Attorney Docket No.: 030142<br>Date: September 17, 2003<br>Express Mail Label No.: EL977101265US |
|---------------|---|--|
| Dear Sir:     | 11-41   | on of  |
| Tonemitted h  | erewith for filing is the patent application      | OH OI.   |
| Inventor(s):  | Nischal Abrol, Duncan Ho                          | UCING REGISTRATION OVERHEAD IN PACKE   |
| For:          | AVOIDING DATA LOSS AND RED                        | OCITO 12   |
| roi.          | NETWORKS.   |  |
|               |   |  |
| Enclosed are: | application (27) total pages.                     | mal ( ) sheet(s).  |

|  | Patent appli |
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- Signed Unsigned . Status ) pages and Recordation Form Cover Sheet.
  - a. | PTO-1449
    b. | Copies of IDS Citations (number of citations:

## 8. Other:

| b. ☐ Copies of I<br>☐ Other:                        | DS Charlons (num                                   |                    |                  | Fee Paid   |
|---|--|--------------------|------------------|------------|
|   | (a) Filed  | (b) Extra Claims   | Large Entity Fee |            |
| CLAIMS:   |  | 13                 | x \$18 =         | \$234.00   |
| Total*  | 33 - 20  | 1 10               | x \$84 =         | \$840.00   |
| Independent**                                       | 13 - 3   | 10                 | \$280            | \$0        |
| A Caleinia Dependen                                 | t Claim(s): No                                     | Yes                | -                | \$750.00   |
| Multiple Dependent Claim(s):                        |  |                    | \$750            |            |
|   |  |                    | TOTAL FEE        | \$1,824.00 |
| *If the number in colum<br>**If the number in colum | n a is less than 20, en<br>mn b is less then 3, en | ter 0 in column b. |                  |            |

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11. ☑ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: September 17, 2003

Signature: Kevin Cheatham, Reg. No. 48,766 Phone No. (858) 845-8450

## CORRESPONDENCE ADDRESS

Send correspondence to Customer No. 23696 at the following address:

QUALCOMM Incorporated Attn: Patent Department 5775 Morehouse Drive San Diego, California 92121-1714 (858) 658-5787 Telephone: (858) 658-2502 Facsimile:

(TRANSUTILAPP.VERI.H-07/30/03)

### UTILITY PATENT APPLICATION TRANSMITTAL

| MAIL STOP PATENT APPLICATION<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450 |   | At<br>Da   | Cust mer N . 23696<br>Attorney Docket No.: 030142<br>Date: September 17, 2003<br>Express Mail Label No.: EL977101265US |                               |             |
|--|---|--|--|-------------------------------|-------------|
| Dear   | Sir:  |  |  |                               |             |
| Tran   | smitted herewith  | for filing is the paten  | t application of:  |                               |             |
|  |   | Abrol, Duncan Ho   |  |                               |             |
| For:   |   | OING DATA LOSS   | AND REDUCING RE  | GISTRATION OVERHEAD           | ) IN PACKET |
| 1. \(\begin{aligned} 2. \(\beta\) 3. \(\beta\) 4. \(\beta\) 5. \(\beta\) 6. \(\beta\) 7. \(\beta\)     | Drawings: X F Declaration/Pow This application An Assignment A Preliminary A Information Dise a. PTO-14 | er of Attorney: claims priority from ( ) pages and Romendment ( ) pelosure Statement (IE | ,  | signed<br>o. , Filed , Statu: | s .         |
| ſ  | CLAIMS:   | (a) Filed  | (b) Extra Claims   | Large Entity Fee              | Fee Paid    |
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| Multiple Dependent Claim(s): ⊠ No ☐ Yes  |           |                  | \$280            | \$0        |
| APPLICATION FILING FEE   |           |                  | \$750            | \$750.00   |
| *If the number in column a is less than 20, enter 0 in column b.  **If the number in column b is less than 3, enter 0 in column b. |           |                  | TOTAL FEE        | \$1,824.00 |

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